

CONFIDENTIAL

Request to Disclose Individual User eResource Records

Note: this document can be emailed/faxed to the Office of the State CIO to start the process of fulfilling the request. Records will not be released until a signed hard copy is received by the CIO. Please complete all required areas indicated by the red * and forward. All correspondence should be marked "CONFIDENTIAL".

State Mail:
Dept of Technology & Information
Office of the State CIO
801 Silver Lake Boulevard
Dover, DE 19904 SLC: D410

FAX: 302-677-7081

Email

erecordsrequest@state.de.us

*TO: SECRETARY*REQUESTOR:	, CHIEF INFORMAT *PHONE:	ION OFFICER/STATE OF DELAWARE *AGENCY/ORGANIZATION:
(Typically IRM or Director Level and above)		
*REQUEST IS IN CONJUNCTION WITH:		
*AUTHORIZING OFFICIAL CONCURS: YES NO (Work will not begin until marked YES.)		
My signature below authorizes you to provide the records indicated to the individual named as requestor on this form. I believe this request is required to meet a Court Order, Audit, FOIA, or legitimate State Operational or Management Purposes. Note: If the individual user is a direct report to the authorizing official, a higher level authorization is required.		
*AUTHORIZING OFFICIAL'S NAME: *TITLE:		
*DATE:		
*AUTHORIZING OFFICIAL'S SIGNATURE: (Records will not be released until Signature Copy is received)		
*INDIVIDUAL USER FULL NAME:		
*WORK LOCATION: *EMAIL ADDRESS:		
*eRecords Requested		
): 	
_	n: n:	
**Please Describe Other: (See Note Below)		
**Note: "OTHER" can include requests for mainframe & server records as well as DTI assistance in developing, monitoring or obtaining records from specific PCs. "Other" can also include a request for temporary or permanent access to employee electronic files where the employee terminated employment, is out ill for an extended period of time, or other circumstances where the ability to manage the business warrants access. Requested Records will only be provided to the "requestor" unless other instructions are provided.		
Department of Technology & Information CIO Approval:		
SIGNATURE:		DATE: